Influenza Surveillance Report

Division of Epidemiology - Disease Surveillance and Investigation

District of Columbia Department of Health

2015-2016 Influenza Season Week 16 (April 17, 2016 – April 23, 2016)

(All data are preliminary and may change as more reports are received)

SUMMARY

- 56 cases of Influenza were reported by hospitals during this reporting period
- One pediatric-death associated with Influenza was reported, which occurred during week 13
- For the 2015-2016 Influenza Season to-date, 982 positive Influenza cases have been reported
- DC PHL did not report any specimens tested for week 16
- Flu activity picked back up slightly since last week, and remains elevated

INFLUENZA SURVEILLANCE FROM HOSPITALS & AMBULATORY CARE FACILITIES

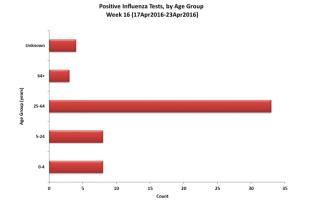
District of Columbia hospitals and laboratories report detailed information on cases of Influenza on a daily basis. However, in accordance with CDC guidelines, only Influenza-associated deaths in cases <18 years of age and Novel Influenza A infections are reportable. We also request that Influenza hospitalizations be reported if possible.

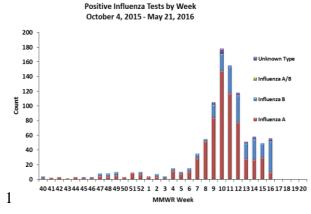
The table below summarizes weekly and cumulative cases of Influenza for the 2015-2016 Season. Data are also presented by age group and by number of cases reported weekly. During week 16 (April 17, 2016– April 23, 2016), there were 56 new cases of Influenza reported. In addition, there was one flu associated pediatric death, associated with an influenza A (H1N1) virus, and occurred during week 13. To date, the District has received 982 positive Influenza cases reported by hospitals.

Surveillance of Influenza Cases Reported By Influenza Type

	Week 16 (April 17, 2016– April 23, 2016)		Cumulative Cases for Weeks 40 – 20 (October 4, 2015 – May 21, 2016)	
Influenza A	10	(17.86 %)	693	(70.57%)
Influenza B	42	(75.00%)	266	(27.09%)
Influenza A/B	0	(0%)	0	(0%)
Influenza (not typed)	4	(7.14%)	23	(2.34%)
Total	56*	(100%)	982*	(100.00%)

 $* Includes \ results \ from \ Rapid \ Diagnostic \ Testing, \ Viral \ Culture, \ RT-PCR, \ Serology, \ and \ Immunofluorescence.$





RAPID DIAGNOSTIC TESTING

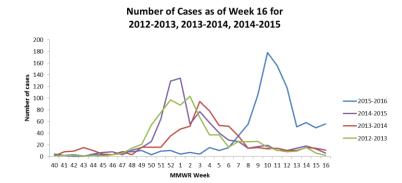
Rapid Diagnostic Tests are screening tests used to detect the Influenza virus in a short period of time. While initially less accurate than PCR and viral culture, rapid diagnostics are more accurate as the Influenza season progresses. During week 16, 181 out of a total of 360 tests were performed using rapid diagnostic testing in clinical laboratories. Of these, 29 (16.02%) positive Influenza specimens were identified during week 16 using rapid diagnostics.

Week: 16 (Apr 17, 2016 – Apr 23, 2016)					
No. of specimens tested Rapid Diagnostics	181				
No. of positive specimens (%)	29 (16.02%)				
Positive specimens by type/subtype					
Influenza A	7 (24.14%)				
Influenza B	18 (62.07%)				
Influenza A/B	0 (0%)				
Influenza – unknown type	4 (13.79%)				

WEEK 16 COMPARISON WITH PREVIOUS SEASONS

For week 16, there were 56 cases in the current 2015-2016 season, 6 cases in last year's 2014-2015 season, 11 cases in the 2013-2014 season, and 2 in the 2012-2013 season.

Cumulatively, there are a total of 982 cases in the district up to week 16 for the current season, 811 during the 2014-2015 season, 671 in the 2013-2014 season, and 784 in the 2012-2013 season.



INFLUENZA-LIKE ILLNESS (ILI) SURVEILLANCE

Sentinel surveillance for ILI consists of three outpatient reporting sites for the District of Columbia. The sentinel surveillance sites report the total number of ILI cases encountered per week and the total number of patients seen at the clinic during that same week. For this system, ILI is defined as the existence of fever (temperature of 100°F [37.8°C] or greater) and a cough and/or a sore throat in the absence of a known cause other than Influenza.

For week 16, sentinel providers reported 139 of 2391 (5.81%) visits that met the criteria for ILI.

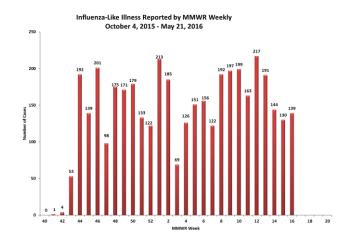
Sentinel Surveillance ILI Activity for Washington, DC

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Week of	Activity *
Apr 17 – Apr 23	Local

*No Activity – overall clinical activity remains low and there are no lab confirmed Influenza cases;

Sporadic – isolated lab confirmed Influenza cases reported and ILI activity is not increased;

Local – increased ILI activity and recent lab confirmed Influenza cases. As the District of Columbia is not a state, this is the highest level of ILI activity it can report.



INFLUENZA TESTING BY THE DISTRICT OF COLUMBIA PUBLIC HEALTH LABORATORY (DC PHL)

The DC PHL subtypes human isolates to monitor the circulating strains of Influenza. The isolates are submitted to the DC PHL by hospitals and commercial laboratories. DC PHL did not report any specimens tested for week 16.

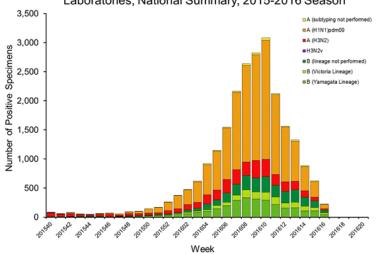
DC PHL Surveillance of Influenza Cases Reported By Influenza Subtype

DC PHL Influenza Testing	April 17, 2016 – April 23, 2016	Total Cases October 4, 2015 – May 21, 2016
Number of specimens tested	0	58
 Number of specimens positive for Influenza: 	0 (0%)	6 (10.35%)
Influenza A	0 (0%)	3 (50.0%)
■ H1 2009 H1N1	0 (0%)	2(66.7%)
H1 seasonal	0 (0%)	0 (0%)
■ H3	0 (0%)	1(33.3%)
Influenza B	0 (0%)	3 (50.0%)

NATIONAL INFLUENZA ASSESSMENT

The CDC's weekly seasonal Influenza surveillance report for week 16 noted that influenza activity decreased in the United States. The proportion of deaths due to Influenza and pneumonia in the US was below the epidemic threshold. Four pediatric deaths were reported to the CDC during week 16, two of which were associated with un-typed influenza A viruses, one with an influenza B virus, and one with an un-typed influenza virus. For the 2015-2016 season, a total of 60 pediatric deaths associated with Influenza have been reported in the US. During week 16, 651 specimens were tested by public health laboratories, of which 224 were positive. Of the 224 respiratory specimens that tested positive during week 16, 105 (46.9%) were Influenza A and 119 (53.1%) were Influenza B. Of the Influenza A samples, 76 (72.4%) were 2009 H1N1, 25 (23.8%) were H3, and 4 (3.8%) were not subtyped.





Get Vaccinated!

To find an Influenza vaccine provider, visit the District of Columbia Immunization Resource Center at $\underline{\text{http://doh.dc.gov/node/190532}}$



For additional information about Influenza and Influenza activity in the United States, please visit: http://www.cdc.gov/flu/index.htm. Questions about Influenza in the District of Columbia or this report should be directed to the Division of Epidemiology - Disease Surveillance and Investigation at (202) 442-9150 or email keith.li@dc.gov.